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FEC FORM 1

STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE II APR -4 AMII: 10

			Offi	ce Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
BOB MASSIE	FOR U.S. SEN	ATE		
1 1 1 1 1	156 ROLANI	ST., SUITE 214	<u> </u>	
ADDRESS (number and street)			<u> </u>	
(Check if address is changed)	BOSTON	-	MA O	<u></u>
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	ESS (Please provide only one	e-mail address) - @ bobmassie. 0	ろ !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	
COMMITTEE'S WEB PAGE AD	ODRESS (URL)	h 1	~	,
(Check if address is changed)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. bobmassie.or	5 	
2. DATE 03	Z_O_1_1			
3. FEC IDENTIFICATION N		\$ d, 4 9 2 5 6 1		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined		est of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasur	Shelley Sulley Afra	Alpern		
Signature of Treasurer	Sulley Afra		Date 03	5 2 2 2 1 1 2 2 1 1 1 2 2 1 1 1 2 2 1 1 1 2 1
NOTE: Submission of false, error	•	on may subject the person signing t		penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

-> no further changes <-